

## WORKFORCE DISABILITY EQUALITY STANDARD REPORTING TEMPLATE

# Workforce Disability Equality Standard

<b>Name of organisation:</b>	Hull University Teaching Hospital NHS Trust
<b>Date of report:</b>	March 2023
<b>Name and title of Board lead for the Workforce Disability Equality Standard:</b>	Simon Nearney, Director of Workforce & OD
<b>Name of lead compiling this report:</b>	Mano Jamieson, EDI Manager
<b>Names of commissioners this report has been sent to:</b>	Humber & North Yorkshire Health & Care Partnership ICB
<b>Name of co-ordinating commissioner this report has been sent to:</b>	HNY ICB
<b>Unique URL link on which this report and associated Action Plan will be found:</b>	<a href="http://www.hey.nhs.uk">www.hey.nhs.uk</a>
<b>This report has been signed off by on behalf of the Board on (12<sup>th</sup> September 2023 by Jonathan Lofthouse):</b>	Jonathan Lofthouse, Chief Executive

### 1. Background Narrative

**Any issues of completeness of data:** The data has been collected from the Trust's Electronic Staff Record (ESR) however 24.25% of the workforce have not declared as disabled or non-disabled, which represents 2,305 of the total workforce.

### 2. Total Numbers of Staff

**Total number of staff employed within the Trust at the date of the report:** 9,505

**Proportion of disabled staff employed within the Trust at the date of the report:** 3.42% of the total staff employed as self-declared through ESR.

### 3. Self-Reporting

**The proportion of total staff who have self-reported disabled/non-disabled:** 72.33%

**Have any steps been taken to increase declaration rates?** All new starters to the organisation are asked to complete an equality monitoring form and their details are recorded on ESR. Existing staff continue to be reminded to check their personal details and update their ESR entry where appropriate and we have run a number of "bridging the gap" sessions.

**Are any steps planned during the current reporting period to improve the level of self-reporting?** To improve the quality of data stored within ESR, ESR Self Service continues to be rolled out, highlighting to staff that they can update their personal information, including ethnicity, marital/partnership status and disability status. To support this process we will reinforce the "bridging the gap initiative to encourage declaration as well as raising the profile of disabled staff by the introduction of the Zero Tolerance to Ableism framework.

### 4. Workforce Data

**What period does the organisation's workforce data refer to:** Staff in post at 31 March 2023 and activity during the financial year 2022/23.

## 5. Workforce Disability Equality Indicators

	Indicator	Data for reporting year 2022/23	Data for previous year 2021/22	Narrative – the implications of the data and any additional background explanatory narrative	Action taken and planned including e.g. does the indicator link to EDS2022 evidence and/or a corporate Equality Objective																								
1	Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. Organisations should undertake this calculation separately for non-clinical and for clinical staff.	<p>See Appendix 2 for breakdown by pay banding (From ESR). Where disability is known for 31 March 2023:</p> <table border="1"> <tr> <td>Non-clinical workforce (Non-disabled) =</td> <td>16.66%</td> <td>Non-clinical workforce (Non-disabled) =</td> <td>15.70%</td> </tr> <tr> <td>Non-clinical workforce (Disabled) =</td> <td>0.86%</td> <td>Non-clinical workforce (Disabled) =</td> <td>0.74%</td> </tr> <tr> <td>Clinical workforce (non-medical Non-disabled) =</td> <td>44.47%</td> <td>Clinical workforce (non-medical Non-disabled) =</td> <td>41.53%</td> </tr> <tr> <td>Clinical workforce (non-medical Disabled) =</td> <td>2.22%</td> <td>Clinical workforce (non-medical Disabled) =</td> <td>1.96%</td> </tr> <tr> <td>Clinical workforce (medical and dental non-disabled) =</td> <td>11.19%</td> <td>Clinical workforce (medical and dental Non-disabled) =</td> <td>11.50%</td> </tr> <tr> <td>Clinical workforce (medical and dental Disabled) =</td> <td>0.34%</td> <td>Clinical workforce (medical and dental Disabled) =</td> <td>0.27%</td> </tr> </table>	Non-clinical workforce (Non-disabled) =	16.66%	Non-clinical workforce (Non-disabled) =	15.70%	Non-clinical workforce (Disabled) =	0.86%	Non-clinical workforce (Disabled) =	0.74%	Clinical workforce (non-medical Non-disabled) =	44.47%	Clinical workforce (non-medical Non-disabled) =	41.53%	Clinical workforce (non-medical Disabled) =	2.22%	Clinical workforce (non-medical Disabled) =	1.96%	Clinical workforce (medical and dental non-disabled) =	11.19%	Clinical workforce (medical and dental Non-disabled) =	11.50%	Clinical workforce (medical and dental Disabled) =	0.34%	Clinical workforce (medical and dental Disabled) =	0.27%		In total 72.33% of Trust staff declared themselves as disabled or non-disabled. The highest percentage of disabled employees are within the clinical workforce (non-medical) whilst the lowest percentage of disabled employees are within the clinical workforce (medical and dental)	<p>Please see action plan.</p> <p>Actions link to EDS2022 goals and the Trust Equality Objectives.</p>
Non-clinical workforce (Non-disabled) =	16.66%	Non-clinical workforce (Non-disabled) =	15.70%																										
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2	Relative likelihood of Non-disabled staff being appointed compared to disabled applicants from shortlisting across all posts.	<p>Non-disabled: 0.26 Disabled: 0.16 Relative likelihood: 1.56</p>	<p>Non-disabled: 0.24 Disabled: 0.21 Relative likelihood: 1.14</p>	The data shows that Non-disabled staff are more likely than Disabled staff to be appointed from shortlisting. However we are shortlisting more disabled staff through the activity of the recruitment	<p>Please see action plan.</p> <p>Actions link to EDS2022 goals and the Trust Equality Objectives.</p>																								

	<b>Indicator</b>	<b>Data for reporting year 2022/23</b>	<b>Data for previous year 2021/22</b>	<b>Narrative – the implications of the data and any additional background explanatory narrative</b>	<b>Action taken and planned including e.g. does the indicator link to EDS2022 evidence and/or a corporate Equality Objective</b>
				team ensuring Managers adhere to the preferential interview offer under the Employer Confident Scheme	
3	Relative likelihood of Disabled staff entering the formal capability process compared to Non-disabled staff. This indicator will be based on data from a two year rolling average of the current year and the previous year.	Disabled: N/A Non-disabled: N/A Relative likelihood: N/A	Disabled: 0.0001 Non-disabled: 0.0002 Relative likelihood: 11.56	The numbers of staff entering the formal capability process are low, the relative likelihood of entering the formal capability process is nil for both Disabled and Non-Disabled staff.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
4 a) i	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.	Non-disabled: 27.5% Disabled: 34.5% (From Staff Survey December 2022)	Non-disabled: 24.6% Disabled: 30.3% (From Staff Survey December 2021)	The percentage of Disabled and Non-Disabled staff experiencing harassment, bullying or abuse from patients, relatives or the public has increased.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
4 a) ii	Percentage of staff experiencing harassment, bullying or abuse from managers in last 12 months.	Non-disabled: 12.3% Disabled: 20.6% (From Staff Survey December 2022)	Non-disabled: 12.6% Disabled: 17.9% (From Staff Survey December 2021)	The percentage of Disabled and Non-disabled staff experiencing harassment, bullying or abuse from managers has increased.	Please see action plan. Actions link to EDS2022 goals and the Trust Equality Objectives.
4 a) iii	Percentage of staff experiencing harassment, bullying or abuse from other colleagues in last 12 months.	Non-disabled: 20.7% Disabled: 29.0% (From Staff Survey December 2022)	Non-disabled: 18.5% Disabled: 27.9% (From Staff Survey December 2021)	The percentage of Non-disabled and Disabled staff experiencing harassment, bullying or abuse from other colleagues has decreased.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
4b	Percentage of staff that the last time they	Non-disabled: 43.2% Disabled: 47.6%	Non-disabled: 41.5% Disabled: 43.0%	The percentage of Disabled staff reporting harassment,	Please see action plan.

	<b>Indicator</b>	<b>Data for reporting year 2022/23</b>	<b>Data for previous year 2021/22</b>	<b>Narrative – the implications of the data and any additional background explanatory narrative</b>	<b>Action taken and planned including e.g. does the indicator link to EDS2022 evidence and/or a corporate Equality Objective</b>
	experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months.	(From Staff Survey December 2022)	(From Staff Survey December 2021)	bullying or abuse at work has increased.	Actions link to EDS2022 goals and the Trust Equality Objectives.
5	Percentage of staff believing the Trust provides equal opportunities for career progression or promotion.	Non-disabled: 58.9% Disabled: 49.2% (From Staff Survey December 2022)	Non-disabled: 58.4% Disabled: 52.2% (From Staff Survey December 2021)	The percentage of Disabled staff believing the Trust provides equal opportunities for career progression or promotion has decreased.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
6	Percentage of staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.	Non-disabled: 22.9% Disabled: 35.8% (From Staff Survey December 2022)	Non-disabled: 25.9% Disabled: 31.3% (From Staff Survey December 2021)	The Percentage of Disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties has remained the same.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
7	Percentage of staff saying they are satisfied with the extent to which their organisation values their work.	Non-disabled: 38.6% Disabled: 28.6% (From Staff Survey December 2022)	Non-disabled: 41.3% Disabled: 31.6% (From Staff Survey December 2021)	The percentage of Disabled staff saying they are satisfied with the extent to which their organisation values their work has decreased.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
8	Percentage of Disabled staff saying their employer has made adequate adjustment(s) to enable them to carry out their work.	71.4% (From Staff Survey December 2022)	69.8% (From Staff Survey December 2021)	The percentage of Disabled staff saying their employer has made adequate adjustment(s) to enable them to carry out their work has decreased.	Please see action plan.  Actions link to EDS2022 goals and the Trust Equality Objectives.
9a	Staff engagement score for Disabled staff, compared to Non-disabled staff and the	Non-disabled staff: 6.5 Disabled: 6.0 Organisation: 6.4	Non-disabled staff: 6.9 Disabled: 6.4 Organisation: 6.7	The staff engagement score for Disabled staff continues to be lower than for Non-disabled staff.	Please see action plan.

	<b>Indicator</b>	<b>Data for reporting year 2022/23</b>	<b>Data for previous year 2021/22</b>	<b>Narrative – the implications of the data and any additional background explanatory narrative</b>	<b>Action taken and planned including e.g. does the indicator link to EDS2022 evidence and/or a corporate Equality Objective</b>
	overall score for the organisation.	(From Staff Survey December 2022)	(From Staff Survey December 2021)		Actions link to EDS2022 goals and the Trust Equality Objectives.
9b	Has the Trust taken action to facilitate the voices of Disabled staff in the organisation to be heard?	Yes	Yes	The Trust has an Enabled Staff Support Network and held a Network Conference.	Please see action plan. Actions link to EDS2022 goals and the Trust Equality Objectives.
10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce.	2.0%	4.0%	Considering the percentage of staff who have self-reported as Non-disabled and the percentage of staff who have self-reported as Disabled the disaggregated percentage difference would be expected to be very low. The Trust acknowledges that, in respect of disability, the Board is not representative of the population it serves. Within Hull and East Riding the disabled population is 19%, whilst within HUTH the declaration is 3.43%.	Please see action plan. Actions link to EDS2022 goals and the Trust Equality Objectives.

**6. Are there any other factors or data which should be taken into consideration in assessing progress? No**

**7. Organisations should produce a detailed WDES Action Plan, agreed by its Board. Such a Plan would normally elaborate on the actions summarised in section 5, setting out the next steps with milestones for expected progress against the WDES indicators. It may also identify the links with other work streams agreed at Board level, such as EDS2022. You are asked to attach the WDES Action Plan or provide a link to it.**

The WDES Action plan is attached.

				Snapshot of data as at 31st MARCH 2023								
Metric	Indicator	Measure	Disabled staff		Non-disabled staff		Disability Unknown or Null		Overall			
			# Disabled	% Disabled	# Non-disabled	% Non-disabled	# Unknown/Null	% Unknown/Null	Total			
1	Percentage of staff in AfC paybands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.	<b>1a) Non Clinical Staff</b>										
		Under Band 1	Headcount	0	0.0%	7	87.5%	1	12.5%	8		
		Bands 1	Headcount	1	5.6%	8	44.4%	9	50.0%	18		
		Bands 2	Headcount	30	3.1%	682	69.6%	268	27.3%	980		
		Bands 3	Headcount	22	4.5%	348	71.8%	115	23.7%	485		
		Bands 4	Headcount	11	5.1%	153	71.2%	51	23.7%	215		
		Bands 5	Headcount	4	2.4%	126	75.9%	36	21.7%	166		
		Bands 6	Headcount	5	3.8%	94	70.7%	34	25.6%	133		
		Bands 7	Headcount	3	3.1%	64	65.3%	31	31.6%	98		
		Bands 8a	Headcount	2	2.9%	43	62.3%	24	34.8%	69		
		Bands 8b	Headcount	1	2.1%	27	57.4%	19	40.4%	47		
		Bands 8c	Headcount	2	10.5%	7	36.8%	10	52.6%	19		
		Bands 8d	Headcount	0	0.0%	5	55.6%	4	44.4%	9		
		Bands 9	Headcount	0	0.0%	2	50.0%	2	50.0%	4		
		VSM	Headcount	1	3.7%	18	66.7%	8	29.6%	27		
		Other (e.g. Bank or Agency) Please specify in notes.	Headcount	0		0		0		0		
		Cluster 1: AfC Bands <1 to 4	Auto-Calculated	64	3.8%	1198	70.2%	444	26.0%	1706		
		Cluster 2: AfC bands 5 to 7	Auto-Calculated	12	3.0%	284	71.5%	101	25.4%	397		
		Cluster 3: AfC bands 8a and 8b	Auto-Calculated	3	2.6%	70	60.3%	43	37.1%	116		
		Cluster 4: AfC bands 8c to VSM	Auto-Calculated	3	5.1%	32	54.2%	24	40.7%	59		
		Total Non-Clinical	Auto-Calculated	82	3.6%	1584	69.5%	612	26.9%	2278		
				<b>1b) Clinical Staff</b>								
				Under Band 1	Headcount	5	7.81%	59	92.19%	0	0.00%	64
				Bands 1	Headcount	0	0.00%	1	100.00%	0	0.00%	1
				Bands 2	Headcount	32	2.80%	890	78.00%	219	19.19%	1141
				Bands 3	Headcount	20	3.92%	332	65.10%	158	30.98%	510
				Bands 4	Headcount	6	2.76%	146	67.28%	65	29.95%	217
				Bands 5	Headcount	80	4.12%	1523	78.42%	339	17.46%	1942
				Bands 6	Headcount	39	3.76%	734	70.78%	264	25.46%	1037
				Bands 7	Headcount	20	3.07%	386	59.20%	246	37.73%	652
				Bands 8a	Headcount	8	4.32%	110	59.46%	67	36.22%	185
				Bands 8b	Headcount	1	1.92%	26	50.00%	25	48.08%	52
				Bands 8c	Headcount	0	0.00%	10	47.62%	11	52.38%	21
				Bands 8d	Headcount	0	0.00%	2	66.67%	1	33.33%	3
				Bands 9	Headcount	0	0.00%	1	50.00%	1	50.00%	2
				VSM	Headcount	0	0.00%	7	43.75%	9	56.25%	16
				Other (e.g. Bank or Agency) Please specify in notes.	Headcount	0		0		0		0
				Cluster 1: AfC Bands <1 to 4	Auto-Calculated	63	3.3%	1428	73.9%	442	22.9%	1933
				Cluster 2: AfC bands 5 to 7	Auto-Calculated	139	3.8%	2643	72.8%	849	23.4%	3631
				Cluster 3: AfC bands 8a and 8b	Auto-Calculated	9	3.8%	136	57.4%	92	38.8%	237
				Cluster 4: AfC bands 8c to VSM	Auto-Calculated	0	0.0%	20	47.6%	22	52.4%	42
				Total Clinical	Auto-Calculated	211	3.6%	4227	72.3%	1405	24.0%	5843
		Medical & Dental Staff, Consultants	Headcount	3	0.59%	354	69.14%	155	30.27%	512		
		Medical & Dental Staff, Non-Consultants career grade	Headcount	1	1.61%	46	74.19%	15	24.19%	62		
		Medical & Dental Staff, Medical and dental trainee grades	Headcount	28	3.46%	664	81.98%	118	14.57%	810		
		Total Medical and Dental	Auto-Calculated	32	2.31%	1064	76.88%	288	20.81%	1384		
		Number of staff in workforce	Auto-Calculated	325	3.42%	6875	72.33%	2305	24.25%	9505		
10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated:  • By Voting membership of the Board  • By Executive membership of the Board  This is a snapshot as of at 31st March 2023.	Total Board members	Headcount	1	5.88%	9	52.94%	7	41.18%	17		
		<i>of which: Voting Board members</i>	Headcount	1	7.69%	8	61.54%	4	30.77%	13		
		<i>: Non Voting Board members</i>	Auto-Calculated	0	0.00%	1	25.00%	3	75.00%	4		
		<i>of which: Exec Board members</i>	Headcount	1	11.11%	4	44.44%	4	44.44%	9		
		<i>: Non Executive Board members</i>	Auto-Calculated	0	0.00%	5	62.50%	3	37.50%	8		
		Difference (Total Board - Overall workforce )	Auto-Calculated		2%		-19%		17%			
		Difference (Voting membership - Overall Workforce)	Auto-Calculated		4%		-11%		7%			
		Difference (Executive membership - Overall Workforce)	Auto-Calculated		8%		-28%		20%			

## WORKFORCE DISABILITY EQUALITY STANDARD ACTION PLAN 2023/2024

The Action Plan has been developed, based on the 22/23 WDES technical data results, to help close the gaps in workplace experience between Disabled & Non-disabled staff.

Action	Metric	Delivery Timescale	Lead Responsibility
<p><b>1. Continue to work closely with Capital Development to work with them to ensure that contractors deliver Equality Impact Assessed Projects</b></p> <ul style="list-style-type: none"> <li>• Specific question developed to be used in the Pre Qualifying Questionnaire (PQQ) to be used for all new and existing contractors.</li> <li>• Ensure EF&amp;D colleagues actively ensure that the PQQ is used and only fully approved contractors are used by the Trust for capital and estate development projects.</li> </ul>	<p><b>8, 9a</b> <b>EDS 2022 2D, 3C</b></p>	<p><b>September 2023/Ongoing</b></p>	<p><b>EDI Manager, Head of Capital Projects</b></p>
<p><b>2. Launch a Zero Tolerance to Ableism framework</b></p> <ul style="list-style-type: none"> <li>• Set up a distinct QR code and Database to report and record incidents of Ableism.</li> <li>• Establish a Circle group to have overview of specific incidents, heat map areas and to triage to eliminate disability discrimination.</li> <li>• Ensure that the term Ableism is communicated and fully understood throughout the Trust</li> </ul>	<p><b>3, 4a, 4b, 8, 9a, 9b</b> <b>EDS 2022 2B</b></p>	<p><b>September 2023</b></p>	<p><b>EDI Manager &amp; OD</b></p>



Action	Metric	Delivery Timescale	Lead Responsibility
<p><b>3. Review existing recruitment process through an EDI lens and overhaul as appropriate</b></p> <ul style="list-style-type: none"> <li>• Conduct a full review of our Disability Confident status with aim to achieve Disability Leader status</li> <li>• Design specific roles for individuals with Learning Disabilities, utilising the Anchor Network status of the Trust to continue our Widening Participation work to increase adequate and appropriate opportunities.</li> </ul>	<p><b>2, 5</b> <b>EDS 2022 2D</b></p>	<p><b>October 2023/Ongoing</b></p>	<p><b>EDI Manager</b></p>
<p><b>4. Continue to encourage staff to complete/update personal information details relating to disability on ESR, through increasing disability confidence</b></p> <ul style="list-style-type: none"> <li>• “Bridging the Gap” will continue with a specific aim to encourage people with Long Term Conditions to identify with disability declaration to engage with support at an early stage. Also aim to reduce the % of people not declaring either way.</li> <li>• Embed into Trust Health &amp; Wellbeing Strategy</li> </ul>	<p><b>All</b> <b>EDS 2022 2A, 2C</b></p>	<p><b>December 2023/Ongoing</b></p>	<p><b>EDI Manager, Staff Network</b></p>
<p><b>5. Raise the profile of enabling Reasonable Adjustments in the Trust.</b></p> <ul style="list-style-type: none"> <li>• Establish a group to explore options to make the process of reasonable adjustments feel fully supportive for staff making applications whatever the adjustment requested and the process followed</li> <li>• Raise the profile of Access to Work and support staff to apply and make the application for adjustments via Access to Work simpler and explore the feasibility of introducing a centralised process</li> <li>• Enable and promote Line Managers to introduce simple adjustments quickly.</li> <li>• Explore with HR how adjustments in relation to disability related leave and absence can be incorporated into HR processes</li> <li>• Explore Passport options for introduction in Trust</li> </ul>	<p><b>6, 7, 8, 9a</b> <b>EDS 2022 2A</b></p>	<p><b>October 23/Ongoing</b></p>	<p><b>EDI Manager, HR Advisory Team</b></p>
<p><b>6. Develop a leadership programme to support leaders at all levels to develop their understanding and gain practical skills in relation to EDI</b></p> <ul style="list-style-type: none"> <li>• Launch the Disability leadership Programme for staff with a disability in conjunction with Disability UK</li> </ul>	<p><b>5, 7, 9a</b> <b>EDS 2022 3C</b></p>	<p><b>September 2023 – March 2024</b></p>	<p><b>OD Team</b></p>

<ul style="list-style-type: none"> <li>Initial cohort of 12 staff to be a 4 month online programme concluding with a 90 day challenge.</li> </ul>			
<p><b>7. Tailor the Learning and Development Policy to support needs of staff with disabilities</b></p> <ul style="list-style-type: none"> <li>Addendum to Learning and Development Policy to ensure methods of delivery reference to SEN – different options for completing required learning.</li> <li>Scope out via Stat/Man Training Group ways to equality impact assess methodology for disabled staff to access training</li> <li>Access Requirement rider for development sessions – no one arrives to training without their learning needs being met</li> <li>Accessible individual learning pods for disabled staff in place at both HRI and CHH</li> <li>Hearing loop assessment complete and implementation plan for suite 22 and MEC lecture theatre</li> <li>Fully inclusive approach to work experience ensuring all schools and colleges have access to a NHS Careers experience at HUTH. Proactive support to school that support students with a learning disability and neurodiversity.</li> </ul>	<p><b>5, 7, 9a</b> <b>EDS 2022 2A</b></p>	<p><b>December 23/Ongoing</b></p>	<p><b>Education &amp; OD Team</b></p>
<p><b>8. Explore options of an Internal adoption of Sunflower Lanyard scheme</b></p> <ul style="list-style-type: none"> <li>Set up a task &amp; finish group to explore options around support for staff and service users with hidden disabilities.</li> </ul>	<p><b>7, 9a</b> <b>EDS 2022 3C</b></p>	<p><b>March 2024</b></p>	<p><b>EDI Manager, Staff Network</b></p>